PTO/SB/06 (07-06)

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U.S. Patent and Traching Militer (Miles Va. DEPARTMENT OF COMMERCE
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/667,330			ing Date 23/2003	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
⊢	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	- OK	RATE (\$)	FEE (\$)	
	BASIC FEE	\neg	N/A	.ED NO	N/A		N/A	FEE (a)	ł	N/A	FEE (8)	
┝	(37 CFR 1.16(a), (b), s SEARCH FEF	or (c))							ł	<u> </u>	-	
Ë	(37 CFR 1.16(k), (i), (N/A		N/A		N/A		l	N/A		
TO	EXAMINATION FE (37 CFR 1.16(o), (p), (TAL CLAIMS		N/A	_	N/A		N/A			N/A		
(37	CFR 1.16(i))		minus 20 =		•		x \$ =		OR	x \$ =		
(37	DEPENDENT CLAIM CFR 1.16(h))		minus 3 = *				x \$ =]	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pape 50 (\$125 ional 50 s	gs exceed 100 n size fee due for each n thereof. See CFR 1.16(s).								
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))								1			
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.								1	TOTAL		
	APPI	OED - PART II		OTHER THAN SMALL ENTITY OR SMALL ENTITY								
AMENDMENT	07/11/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1 160))	· 36	Minus	 39	= 0	1	x \$ =		OR	X \$50=	0	
	Independent (37 CFR 1.16(h))	• 6	Minus	6	= 0	1	x \$ =		OR	X \$210=	0	
	Application Size Fee (37 CFR 1.16(s))											
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)												
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.1601)		Minus			i	x \$ =		OR	x s =		
	Independent (37 CFR 1,16(h))		Minus	***			x \$ =		OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))]			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					l			OR			
									OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.												

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